

**PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| | |
|--|--|
| Attorney Docket No. | 240905050 |
| First Inventor or Application Identifier | Kiyoshi KASAI, et al. |
| Title | PHYSIOLOGICALLY ACTIVE SUBSTANCE-MEASURING REAGENT AND METHOD FOR MEASURING PHYSIOLOGICALLY ACTIVE SUBSTANCE |

Assignee Name: JSR CORPORATION
Assignee Address: 6-10, Tsukiji 5-chome, Chuo-ku,
Tokyo, Japan

07464 S. PRC
10/62 732
07/28/03

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
Alexandria, Virginia 22313

1. Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. Specification Total Sheets 18

3. Drawing(s) (35 U.S.C. 113) Total Sheets

4. Oath or Declaration Total Pages 3

a. Newly executed (original)

b. Copy from a prior application (37 C.F.R. §1.63(d))
(for continuation/divisional with box 17 completed)

i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in
the prior application, see 37 C.F.R. §1.63(d)(2) and
1.33(b).

5. CD-ROM or CD-R in duplicate, large table or Computer
Program (Appendix)

6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

a. Computer Readable Form (CRF)

b. Specification or Sequence Listing on :

i. CD-ROM or CD-R (2 copies); or

ii. Paper

c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))
8. Application Data Sheet. See 37 CFR 1.76
9. 37 C.F.R. §3.73(b) Statement Power of Attorney
(when there is an assignee)
10. English Translation Document (*if applicable*)
11. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS
 Citations
12. Preliminary Amendment
13. White Advance Serial No. Postcard
14. Certified Copy of Priority Document(s)
(*if foreign priority is claimed*)
15. Applicant claims small entity status.
See 37 CFR 1.27
16. Other: Request for Priority

*17. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below:

Continuation Divisional Continuation-in-part (CIP) of prior application no.:

Prior application information: Examiner: **Group Art Unit:**

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. Amend the specification by inserting before the first line the sentence:

This application is a Continuation Division Continuation-in-part (CIP)
of application Serial No. _____ Filed on _____

This application claims priority of provisional application Serial No. Filed

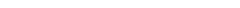
19. CORRESPONDENCE ADDRESS



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| | | | |
|------------|---|-------------------|---------|
| Name: | Norman F. Olson | Registration No.: | 24,618 |
| Signature: |  | Date: | 7-28-03 |
| Name: | James D. Hamilton | Registration No.: | |

Registration No. 28,421

07/28/03
5195
S
Docket No. 240905US0

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Kiyoshi KASAI, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: PHYSIOLOGICALLY ACTIVE SUBSTANCE-MEASURING REAGENT AND METHOD FOR
MEASURING PHYSIOLOGICALLY ACTIVE SUBSTANCE

FEES TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

| FOR | NUMBER FILED | NUMBER EXTRA | RATE | CALCULATIONS |
|--|--------------|--------------|-----------------------------|--------------|
| TOTAL CLAIMS | 5 - 20 = | 0 | x \$18 = | \$0.00 |
| INDEPENDENT CLAIMS | 1 - 3 = | 0 | x \$84 = | \$0.00 |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable) | | | + \$280 = | \$0.00 |
| <input type="checkbox"/> LATE FILING OF DECLARATION | | | + \$130 = | \$0.00 |
| | | | BASIC FEE | \$750.00 |
| | | | TOTAL OF ABOVE CALCULATIONS | \$750.00 |
| <input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY | | | | \$0.00 |
| <input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE | | | + \$130 = | \$0.00 |
| <input type="checkbox"/> RECORDATION OF ASSIGNMENT | | | + \$40 = | \$0.00 |
| | | | TOTAL | \$750.00 |

Please charge Deposit Account No. 15-0030 in the amount of \$0.00 A duplicate copy of this sheet is enclosed.

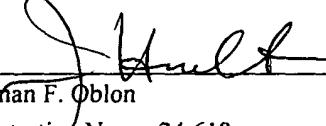
A check in the amount of \$750.00 to cover the filing fee is enclosed.

The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

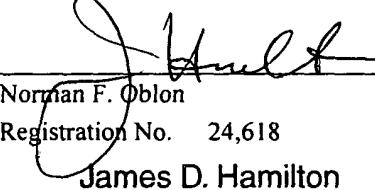
Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: 7.28.03


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